CAMPAIGN DISCLOSURE BD.

Reset Form

FORM	Statement of
DR-SFA	Organization
(Rev. 04/2009)	"Paid For By"
For Office Use Of Comm. # Indexed Audited Computer KL	nly

## 2011 SEP 30 PM 1:54

## FOR INSTRUCTIONS SEE BACK OF FORM

This Form to be filed for each:	
☑ I am filing this form to use the shorter "paid for by" attribution. The filed prior to the distribution or posting of the political material.	he committee will <u>not</u> be crossing the \$750 threshold.* This form must be
Amended form updating any previously filed information includi	ng Date of Election and Year Standing for Election.
"If the committee crosses the threshold, a DR-1 Statement of Organization expenditures, or incurring indebtedness exceeding \$750. In addition, the co	must be filed within 10 days of the committee's accepting contributions, making ommittee will be required to file campaign disclosure reports.
COMMITTEE NAME ↓ ↓ (A candidate's committee must include the	e candidate's last name in the name of the committee).
Harvey for Fifth	uand
iMPORTANT: Indicate type of committee you are registering for:  (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)  (5)County Candidate (6)City Candidate (7)School Board or Other  (10)School Board or Other Political Subdivision PAC (11) Local Ba	) Istatewide PAC ( 3 )State Party ( 4 )County Central Committee
COMMITTEE CHAIR (mandatory for all committees except a	CANDIDATE (mandatory except for a non-candidate committee)
candidate's committee)  Name ↓ ↓	Name + Aller R Harvey
Mailing Address ↓ ↓	
	2306 Cak Valley Or.
City, State ↓ ↓ Zip Code ↓ ↓	Muscatine Java 52761
Phone ( )	Phone (563) 260-4571
	e-Mail two harveys 6, mach link , com
e-Mail	
INDICATE PURPOSE OF COMMITTEE - Check One Box 🛛 Ac Comment or description:	dvocate for/against candidate(s)
All Candidates Enter: Office Sought: Muscafine City Council 5th Word Political Party (if applicable) None	County/Local Candidates and All Other Committees Enter:
Political Party (if applicable) None	County: Muscatine (If active in multiple ballot issue elections, attach list of counties or enter "statewide")
District:	Date of Election: 1/-8-11
Year Standing for Election: 201	Date of Election.
	Att At a de Neuralman
STATEMENT OF AFFIRMATION: By filing this document the committee a	
rules in Chapter 351 of the Iowa Administrative Code.	nat they are subject to the laws in lowa Code chapters 68A and 68B and the administrative
<ol><li>That lowa Code section 68A.405 and rules 351—4.38 through 4.43 require materials except for those items exempted by statute of rule.</li></ol>	the placement of the words "paid for by" and the name of the committee on all political
<ol><li>That lowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit issue PACs.</li></ol>	the receipt of corporate contributions by all committees except for statewide and local ballot
<ol> <li>That if the committee exceeds \$750 in campaign activity, a DR-1 Statement disclosure reports.</li> </ol>	t of Organization must be filed within 10 days and the committee is required to file campaign
5. That this form is filed prior to the distribution or posting of political material r	equiring the "peid for by" attribution.
6. A new form or amended form is required to be filed for each subsequent election that I am involved.	
1	
allen R Harry	9-30-11
Signature of Candidate, OR, for all other committees, Chairperson	Date Signed